2016 APR 12 AM 10: 45

LOUISIANA BOARD OF ETHICS

Post Office Box 4368 Baton Rouge, Louisiana 70821

| VIER 2 PERSONAL FINANCIAL DISCLOSURE STATEMENT (ANNUAL) |
|---|
| I currently hold an office that would require me to file a Tier 2.1, or Tier 3 Personal Financial Disclosure Statement. As such, I have completed SCHEDULE D. |
| ☐ORIGINAL REPORT This Report Covers Calendar Year: <u>△2014</u> MAMENDED REPORT |
| FINAL REPORT (WHERE TERM ENDS IN JANUARY [COVERING JANUARY 1 THROUGH JANUARY]] |
| A final reports must be filed on or before May 15 of the year in which your service to that office ends. Refer to the "GENERAL INFORMATION" sheet of this form to determine eligibility. |
| OFFICE/POSITION HELD: La: Board of Pardon and Parole |
| NAME OF FILER (print full name): Michael Dean Slocum |
| Mailing Address: 400 A. Rig Lake Road |
| City, State, Zip: Pineville, LA 71360 |
| NAME OF SPOUSE(if applicable) (print full name): Welody Hope Gunter Slocum |
| Spouse's Occupation: 5elf-employed |
| Spouse's Principal Business Address: 400 A Big Lake Road |
| City, State, Zip: Pineville LA 11360 |
| CHECK ALL THAT APPLY I have filed my state income tax return for the previous year. I have filed for an extension of my state income tax return for the previous year. |
| Thave filed my federal income tax return for the previous year. |
| ☐ I have filed for an extension of my federal income tax return for the previous year. ☐ I have filed for an extension of my federal income tax return for the previous year AND I am requesting an |
| extension in filing my Tier 2 Personal Financial Disclosure. |
| CERTIFICATE OF ACCURACY |
| I do hereby certify, after having been duly sworn, that the information contained in this personal financial |
| disclosure statement is true and correct to the best of my knowledge, information, and belief. |
| Signature of Filer |
| Sworn to and subscribed before me this $\frac{29}{2}$ day of $\frac{100}{20}$. |
| Sylvia A. (0 F Ton Normy Public (print name) |
| Notany Public (signature) |

Revised October 2014

Form 416A

Date Commission Expires ____

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